

INSTRUCTIONS FOR REPORTING SAFE DEPOSIT BOX CONTENTS

How to Report:

The REPORT OF UNCLAIMED SAFE DEPOSIT BOX CONTENTS is used to report safe deposit box contents and safekeeping items only. **Please file this report by diskette and attach your diskette to the Holder Report Form (page 9).** If you do not have the capability to report by diskette, please complete the form on page 16 and mail it with the Holder Report Form. **DO NOT ATTACH SAFE DEPOSIT REPORTS TO THE CONTENTS.**

When to Remit:

Send all safe deposit box contents or safekeeping items with the November report. Packages should be clearly marked with the owners name. Attach check to holder report form & keep separate from contents. All currency must be sent intact (DO NOT deposit and issue a bank check for currency amount).

Please type or legibly print your report.

- A** HOLDER NAME: Enter the holder's name as it appears on the Holder Report Form. (TREAS 400).
 - B** TAX ID NUMBER: Enter the holder's tax ID number. Use this number on all related correspondence.
 - C** PERIOD COVERED: Enter the period covered for this report.
 - D** PAGE: Enter the page number of the report (for example, 1 of 2).
 - E** DETAIL ITEMS: All shaded areas are for Department use only.
 - 1** Enter the safe deposit box number or safekeeping location where the contents were held.
 - 2** Enter the full name (last name first) of the owner(s) of the safe deposit box or safekeeping item.
 - a) Be sure to include information that would aid in identification, such as Jr., Mrs., etc., after the middle name or initial.
 - b) Corporate titles and the like should be entered exactly as adopted, except that the word "The" should be placed at the end of the name line.
 - c) If a safe deposit box has two owners, the names of both must be shown with the relationship (for example, "trustee for," "and," "or," etc.).
- 3** Enter the owner's Social Security number.
 - 4** Enter the last known address of the owner of the safe deposit box. If the safe deposit box has two or more owners, addresses that are not the same for each owner must be shown. **Out of state contents NOT acceptable.**
 - 5** Enter the date the rental period expired on the safe deposit box, or in the case of safekeeping items, the date of the last contact with the owner.
 - 6** Enter the name of the bank branch location where property was held. List the complete address including the zip code.
 - 7** Enter the amounts due to the holder. These amounts can include unpaid safe deposit box rental charges and drilling fees. DO NOT deduct any of these costs from any cash that may be in the box at this time. After the items are sold by the department the holder may request reimbursement.
 - 8** Enter an itemized description of the safe deposit box or safekeeping contents. The safe deposit box contents will be accepted or rejected based on the description provided. Reminder-if over 10 owners, must be submitted on diskette. Use the following examples in completing your descriptions:
 - a) one gold-colored ring with two clear stones
 - b) one pair screw back earrings, each with one ruby-like stone
 - c) one coin wrapper containing 50 US pennies dated 1918-1964 (if wrapper is empty, please so indicate)
 - d) one hand pellet-gun with black metal barrel

All packages containing weapon sharp objects or hazardous materials **MUST** be clearly marked and weapons **MUST** be unloaded.

NOTE: One item per line of description.

2010

REPORT OF UNCLAIMED SAFE DEPOSIT BOX CONTENTS

PACKAGES CONTAINING WEAPONS MUST BE CLEARLY IDENTIFIED

- A** Holder Name: _____
- B** Tax ID Number: _____
- C** Period Covered: _____ to _____ **D** Page _____ of _____
- E** One Safe Deposit Box Per Page DO NOT ATTACH TO CONTENTS

For Department Use Only (INITIALS)	
<input type="radio"/> Accept	_____
<input type="radio"/> Reject	_____
Allowed Amounts	_____
<input type="radio"/> Rental Charges	_____
<input type="radio"/> Drilling Fees	_____

1 Safe Deposit Box Number		5 Date of Abandonment (Month, Day, Year)	
2 Owner Information		6 Branch Where Property Was Held	
Last	First	Branch Name	Phone #
	Middle	Street or PO Box	
3 Social Security Number	D.O.B.	City	State Zip
4 Owner's Mailing Address		7 Amount Due Holder	
Street or PO Box		Type	Amount
City		Drilling	\$
State		Unpaid Rent	\$
Zip Code		Other	\$
		Must show proof of expenditures. Total \$	

8 Itemized Description of Contents (One Item Per Line or Attached Itemized List)

1.	_____	7.	_____
2.	_____	8.	_____
3.	_____	9.	_____
4.	_____	10.	_____
5.	_____	11.	_____
6.	_____	12.	_____

Do not use form if reporting over 10 owners-report on diskette. **Note: Report contents by diskette.**